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APPROVAL OF UNDP ASSISTANCE TO A PROJECT OF CHINA

IPF:(1992-96) $176 600 000
(CPR/91/434) - Iodine Deficiency Disorders Programme

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DEPT.

Date of approval by the AC:[1]	23 September 1992
Expected duration:	Four years
Proposed executing agency:	Government (China International Centre for Economic and Technical Exchanges (CICETE) in association with World Health Organization (WHO)
Government implementing agencies:	Ministry of Public Health, Ministry of Light Industry, UNICEF
Proposed UNDP contribution:	$1 295 500 Source of funds: IPF
Government UNICEF contribution:	$ 576 100
Proposed WHO contribution:	$ 89 400
Total programme budget:	$1 961 000

Project background

Iodine Deficiency Disorders (IDD) are the leading cause of intellectual handicap in the world. Worldwide, it is estimated that 1 billion people live in iodine deficient areas. Of these, four hundred million live in China. IDD cause a variety of adverse effects on health including: endemic goitre; hypothyroidism; an increased stillbirth and neonatal death rate; increased infant mortality; reproductive failure; and depressed intellectual functioning (an I.Q. deficit of 10 to 15 points) among otherwise "normal" children. The most severe effects of IDD are endemic cretinism with irreversible mental deficiency, deaf-mutism and spastic diplegia. IDD's serious impact on human development makes it an important national development issue. Interest in IDD has been heightened by the 1990 World Summit for Children and the 1991 Montreal Conference on Micronutrient Malnutrition. The World Summit adopted the goal of eliminating IDD globally by the year 2000 which was endorsed by senior Chinese delegation to the meeting.

Although IDD has historically been a huge problem in China, large-scale efforts to control IDD started only in 1979 when the State Council adopted the first policy document on IDD entitled "Tentative Administration Methods for Iodization of Salt to Control IDD" prepared jointly by the Ministries of Public Health, Light Industry, Finance and Commerce. In 1988, MOPH reported that 16 of the 29 provinces had reached national IDD control standards. Many of the 13 provinces which did not achieve IDD control include the most remote and mountainous areas of the country. However, recent data from a China-Australia Technical Cooperation Project indicates that IDD is more prevalent than originally believed

[1] This Fact Sheet reflects the status of the project/revision at the time it was approved by the Action Committee; modifications to the project/revision may have occurred subsequently.

because the national criteria for IDD control has been less sophisticated and sensitive than international criteria. The exact status of IDD in China will not be known until the criteria is revised and an adequate surveillance system exists. To pursue advocacy for IDD control, make interventions to control IDD (iodation of salt/oil and health education/communication), survey and evaluate the IDD control programme, and apply R & D to support IDD control efforts, the Government requested UNDP assistance under the present approval.

Description of project

The long-term objective of the project is to eliminate IDD in China by the year 2000.

The immediate objectives of the project are to: (a) increase the recognition of policy makers that IDD is a national development issue requiring additional support; (b) improve the management of IDD control programmes at national, provincial, prefectural and local levels; (c) develop the capacity of salt industry to provide iodated salt, particularly to severe IDD areas; (d) increase the awareness among target population of the effects of IDD and preventive measures; (e) establish a system of network of provincial surveillance systems for IDD monitoring; and (f) improve the research capacity, particularly on operational components of IDD control.

Project activities will cover nine provinces identified by the Government as priority areas for IDD control on the basis of specific criteria. The project will initially, start with interventions in four provinces in 1993 with five more provinces being included in 1994 when more experience is gained and UNICEF general funds become available. It is hoped that the advocacy meeting scheduled for 1993 will attract additional funding which will allow expansion of project activities particularly at township/village level.

To ensure effective coordination and management, a programme management structure which will include a Programme Steering Committee and a Programme Coordination Committee will be instituted. The Programme Steering Committee will be an inter-ministerial policy body which will monitor and oversee progress in the implementation of the IDD control programme. The responsibility for ensuring coordination between various programme components will lie with the Programme Coordination Committee.

Inputs

UNDP will provide approximately 22 work-months of international consultants; a subcontract for 12 two-week overseas training workshops for central level programme component directors; 25 seven-ten day study tours for provincial leaders, personnel from the salt industry and from MOPH; provincial and prefecture/county level training courses and workshops; laboratory and computer equipment for provincial laboratories and for programme management centers as well as equipment to enhance programme management at the central level.

Financial data

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Personnel	283 500
Subcontract	200 000
Training	461 500
Equipment	310 500
Miscellaneous	40 000
Total	1 295 500